QP ACTION REQUEST SECTION I. ACTION REQUESTED (Originator completes as appropriate) NEW QP REVISE EXISTING QP **DELETE EXISTING QP** DESCRIPTION OF, AND REASON FOR ACTION: QP: Title Rev. ORIGINATOR: ____ Print name Signature Date RETURN THIS FORM TO THE TECHNICAL ASSURANCE PROJECT LEADER, MS J521 **SECTION II.** (TAPL approval and assignment) **APPROVE** DO NOT APPROVE REASON FOR DISAPPROVAL: ASSIGNED PREPARER: Print name TAPL: Print name Signature Date **SECTION III.** (Deletion of QP) NA AFFECTED ORGANIZATION SITE AND REGULATORY ADMINISTRATION TA **TCO** RT SPECIALIST LL OQA REPRESENTATIVE APPROVE DELETION DO NOT APPROVE DELETION REASON FOR DISAPPROVAL: NAME Print name Signature Date SEND THIS FORM TO THE TECHNICAL ASSURANCE PROJECT LEADER, MS J521 Los Alamos

LANL-YMP-QP-06.2

Yucca Mountain Site Characterization Project